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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Ruben	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Serpa	
	identification to your meetin with the trustee.	Serpa G Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Te-	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4100	

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Del	otor 1 Serpa, Ruben		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
	•	4629 W McLean Ave Chicago, IL 60639-3427	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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. Det	tor 1 <u>Serpa, Ruben</u>					Case number (if known)			
Par	Tell the Court About	our Bankr	uptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapt	er 7						
		☐ Chapt	er 11						
		☐ Chapt	er 12		•				
		☐ Chapt							
		·							
8.	How you will pay the fee	abo If yo pre	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				y the fee in installments. I <i>Installments</i> (Official Form 1		ion, sign and attach the Application for Individuals to Pay	The		
		☐ I re	quest that required t	at my fee be waived (You roo, waive your fee, and may o	nay request this option	on only if you are filing for Chapter 7. By law, a judge may, ome is less than 150% of the official poverty line that appli	ies to		
						nts). If you choose this option, you must fill out the Application and file it with your petition.	ation		
9.	Have you filed for bankruptcy within the last	■ No.					·		
	8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases	■ No							
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District	-	When	Case number, if known			
11.	Do you rent your	□ No.	Go to	line 12.					
	residence?	Yes.	· Has vo	our landlord obtained an evid	tion iudament agains	st you and do you want to stay in your residence?			
		— res.		No. Go to line 12.	, , ,	• • • • • • • • • • • • • • • • • • • •			
				Yes. Fill out <i>initial Stateme</i> bankruptcy petition.	ent About an Eviction	Judgment Against You (Form 101A) and file it with this			

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Deb	otor 1 Serpa, Ruben				Case number (if known)		
					(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		
Dar	t 3: Report About Any Bus	oinoccoc \	/au Oum	ac a Sala Proprieta			
f		311163363	i da Owii	as a Sole Froprieto	1		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Nam	e and location of bus	iness		
	A sole proprietorship is a				·		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one		Num	ber, Street, City, Stat	e & ZIP Code		
	sole proprietorship, use a separate sheet and attach it		Q t	t. th			
	to this petition.				to describe your business:		
			_		ess (as defined in 11 U.S.C. § 101(27A))		
				•	Estate (as defined in 11 U.S.C. § 101(51B))		
				•	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	l am	not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	l am Code	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	l am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs immediate Attention		
14.	Do you own or have any	■ No.		<u></u>			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?			
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	is the property?	Number, Street, City, State & Zip Code		
					•		

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Deb	tor 1 Serpa, Ruben	,		,	Case number (if known)
Par	5: Explain Your Efforts t	o Re	ceive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Ab	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	I must check one: I received a briefing from an approved credicounseling agency within the 180 days befor filed this bankruptcy petition, and I received certificate of completion.	t □ rel	u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before you		Attach a copy of the certificate and the payment if any, that you developed with the agency.	plan,	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		I received a briefing from an approved credi counseling agency within the 180 days befo filed this bankruptcy petition, but I do not he certificate of completion.	re l	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee		Within 14 days after you file this bankruptcy pet you MUST file a copy of the certificate and payn plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary wa of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining efforts you made to obtain the briefing, why you unable to obtain it before you filed for bankruptc	were y, and	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			what exigent circumstances required you to file case. Your case may be dismissed if the court is		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
			dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you m still receive a briefing within 30 days after you fil You must file a certificate from the approved ago along with a copy of the payment plan you devel	ust e. ency,	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			if any. If you do not do so, your case may be dismissed.		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental defice that makes me incapable of realizing or rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability. My physical disability causes me to be u to participate in a briefing in person, by pl or through the internet, even after I reaso tried to do so.	none,	Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.	ı	Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a b about credit counseling, you must file a motion waiver credit counseling with the court.		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Serpa, Ruben			Case num	nber (if known)			
Par	t 6: Answer These Questi	ons for Rep	orting Purposes					
16.	What kind of debts do you have?	16a. <i>i</i>	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by individual primarily for a personal, family, or household purpose."					
		[☐ No. Go to line 16b.					
		I	Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain me for a business or investment or through the operation of the business or investment.					
		1	☐ No. Go to line 16c.		·			
			☐ Yes. Go to line 17.					
		16c. 8	State the type of debts you	owe that are not consumer debts or busines	as debts			
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chap	oter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	Yes.	am filing under Chapter 7 paid that funds will be avai	7. Do you estimate that after any exempt prop lable to distribute to unsecured creditors?	erty is excluded and administrative expenses are			
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.		1 -49		☐ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		<u> </u>	<u> </u>			
		□ 100-199 □ 200-999		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	\$ \$0 - \$50	1,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			1 - \$500,000	\$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		\$500,00	1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	\$0 - \$50	,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	\$50,001	I - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
	•		1 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	More than \$50 billion			
Part	7: Sign Below				· · · · · · · · · · · · · · · · · · ·			
For	you	I have exam	nined this petition, and I de	eclare under penalty of perjury that the inform	nation provided is true and correct.			
		If I have cho	osen to file under Chapte e. I understand the relief a	er 7, I am aware that I may proceed, if eligible available under each chapter, and I choose to	le, under Chapter 7, 11,12, or 13 of title 11, United proceed under Chapter 7.			
				I not pay or agree to pay someone who is not quired by 11 U.S.C. § 342(b).	an attorney to help me fill out this document, I			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
			sult in fines up to \$250,00		r property by fraud in connection with a bankruptcy th. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Ruben Se Signature of	erpa	Signature of Det	btor 2			
		Executed or	May 19, 2016	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

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For your attorney, if you are represented by one I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proce Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for we person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed petition is incorrect. I/	
Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for we person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed to file this page. Ist Michael R. Richmond Date May 23, 2016	
an attorney, you do not need to file this page. Signature of Attorney for Debtor May 23, 2016 Michael R. Richmond May 23, 2016 MM / DD / YYYY Michael R. Richmond May 23, 2016 MM / DD / YYYYY Michael R. Richmond May 23, 2016 Michael R. Richmond Michael R. Richmond May 23, 2016 Michael R. Richmond Michae	hich the
Signature of Attorney for Debtor MM / DD / YYYY Michael R. Richmond	with the
Michael R. Richmond	
Printed name	
Heller & Richmond, Ltd.	
33 N Dearborn St Ste 1907	
Chicago, IL 60602-3828	
Number, Street, City, State & ZIP Code	
Contact phone (312) 781-6700 Email address mrichmond@hellerrichmond.	om
3124632	
Bar number & State	

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EST See Ale S		Docume	nt Page 8 of 46		
FIII IN TH	is information to identify your	case and this filing:			
Debtor 1	Ruben Serpa				
	First Name	Middle Name	Last Name		
Debtor 2		Middle Name	Last Name		
(Spouse, if t	ming) First Name				
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF	F ILLINOIS, EASTERN DIVISIO	DN	
Case nur	mber				☐ Check if this is an
					amended filing
Officia	al Form 106A/B				
_		w4			
	edule A/B: Prop				12/15
hink it fits	tegory, separately list and describ s best. Be as complete and accura on. If more space is needed, attach ery question.	te as possible. If two married	people are filing together, both are	e equally responsible for s	upplying correct
Part 1:	Describe Each Residence, Building	g, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do you	own or have any legal or equitable	e interest in any residence, bu	ilding, land, or similar property?		
=	0 . 0 . 0				
_	Go to Part 2.				
☐ Yes.	Where is the property?				
Part 2:	Describe Your Vehicles				
	else drives. If you lease a vehicle,	•	: Executory Contracts and Unex	cpired Leases.	
Yes					
	Detal	Who has an interes	et in the property? Check one	Do not deduct secured	claims or exemptions. Put
3.1 Ma	ake: Buick		at in the property? Check one	the amount of any secu	ured claims on Schedule D:
3.1 Ma	Detal	Debtor 1 only	st in the property? Check one	the amount of any secu Creditors Who Have C	ured claims on Schedule D: laims Secured by Property.
3.1 Ma	ake: Buick LeSabre 2001			the amount of any secu	ured claims on Schedule D:
3.1 Ma Ma Ye Ap	ake: Buick LeSabre 2001	Debtor 1 only Debtor 2 only Debtor 1 and Del		the amount of any secu Creditors Who Have C Current value of the	ured claims on Schedule D: laims Secured by Property. Current value of the
3.1 Ma Ma Ye Ap	ake: Buick odel: LeSabre ear: 2001 oproximate mileage: 130	Debtor 1 only Debtor 2 only Debtor 1 and Del At least one of the	btor 2 only	the amount of any secu Creditors Who Have C Current value of the	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
3.1 May Ap Ot Ap O	ake: Buick odel: LeSabre ear: 2001 oproximate mileage: 130 ther information: craft, aircraft, motor homes, A'eles: Boats, trailers, motors, perso	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Del At least one of the (see instructions) TVs and other recreational and watercraft, fishing vessels You own for all of your entrithat number here	e debtors and another community property vehicles, other vehicles, and a s, snowmobiles, motorcycle acce	the amount of any sect Creditors Who Have C Current value of the entire property? \$2,400.00 accessories ssories entries for pages	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?

Household goods and furnishings
 Examples: Major appliances, furniture, linens, china, kitchenware
 □ No

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Serpa, Rub	Document Page 9 of 46	Desc Main
Debiori	Serpa, Kub	en Case number (il known)	
■ Yes.	Describe	furniture, sofa and tv, bedroom set	\$500.00
□No	les: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collect ll phones, cameras, media players, games	
		1 55 in flat screen	<u>\$100.00</u>
Examp		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or memorabilia, collectibles	baseball card collections; other
Examp. No	ent for sports a les: Sports, photo instruments Describe	ind hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
□ No		s, shotguns, ammunition, and related equipment 1 shotgun and 2 pistols	\$1,500.00
□ No		othes, furs, leather coats, designer wear, shoes, accessories wearing apparel	\$400.00
■ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	silver
Exam ■ No	arm animals ples: Dogs, cats, Describe	birds, horses	
■ No	ther personal ar	nd household items you did not already list, including any health aids you did not list	
		of all of your entries from Part 3, including any entries for pages you have attached for mber here	\$2,500.00
Part 4: De	escribe Your Fina	ncial Assets	
Do you ov	wn or have any	legal or equitable interest in any of the following?	Current value of the

portion you own?
Do not deduct secured claims or exemptions.

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De	ebtor 1	Serpa, Ruben		Document	Page 10 of 46 Case r	number (if known)	
	■ No	s: Money you have in yo	•	·	sit box, and on hand when you fi	le your petition	
	Deposits ∈ Examples	: Checking, savings, o		accounts; certificates counts with the same i	of deposit; shares in credit union nstitution, list each.	ıs, brokerage hous	es, and other similar
	Yes			Institutio	n name:		
		17.1.	Checking	Account Chase			\$300.00
		utual funds, or public Bond funds, investme		th brokerage firms, mo	ney market accounts		
19.	Non-publi joint ven		interests in inc	corporated and unin	corporated businesses, includ	ling an interest in	an LLC, partnership, and
	☐ Yes. Gi	ve specific information Na	n about them ame of entity:		% of	ownership:	
	Negotiabl Non-nego ■ No	e instruments include potiable instruments are ve specific information	personal checks those you canno	, cashiers' checks, pro	negotiable instruments missory notes, and money order by signing or delivering them.	s.	
21.		nt or pension accoun a: Interests in IRA, ERI		1(k), 403(b), thrift savi	ngs accounts, or other pension	or profit-sharing pl	ans
		t each account separat Type	tely. e of account:	Institutio	n name:		
22.	Your shar		s you have mad		inue service or use from a comp ctric, gas, water), telecommunica		or others
	Yes			Institutio	n name or individual:		
	Annuities ■ No □ Yes		dic payment of n		life or for a number of years)		
24.	Interests in			n a qualified ABLE p	ogram, or under a qualified so	ate tuition progra	am.
	■ No □ Yes	Institution	name and desci	ription. Separately file	he records of any interests.11 U	.S.C. § 521(c):	
	■ No	•		rty (other than anyth	ing listed in line 1), and rights	or powers exerci	sable for your benefit
	☐ Yes. Gi	ve specific information	n about them				
26.		copyrights, trademarks: Internet domain name			ual property and licensing agreements		

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

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De	ebtor 1	Serpa,	Ruben		Document	Case number (if known)	
27.	Examp ■ No	oles: Buildir	ises, and other g ng permits, exclus cific information al	ive licenses, d		oldings, liquor licenses, professional licenses	
М	onev or	nronerty o	owed to you?				Current value of the
	onoy or ₁	property (oneu to you.				portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owe	d to you				
	☐ Yes.	Give speci	fic information abo	out them, inclu	ding whether you already	y filed the returns and the tax years	
29.	Examp		due or lump sum a	7. 1	sal support, child suppo	rt, maintenance, divorce settlement, property	settlement
30.		oles: Unpai	omeone owes you d wages, disability id loans you made	insurance pa		s, sick pay, vacation pay, workers' compensat	ion, Social Security benefits;
		Give spec	ific information				
31.	Interes	ts in insur	ance policies	insurance; hea	alth savings account (HS	SA); credit, homeowner's, or renter's insurance	
	■ No						
	☐ Yes.	Name the i		ny of each polic pany name:	cy and list its value.	Beneficiary:	Surrender or refund value:
32.					someone who has died proceeds from a life insur	rance policy, or are currently entitled to receive	property because someone has
	■ No						
	☐ Yes.	Give spec	ific information				
33.	Examp ■ No	oles: Accide	ents, employment		ou have filed a lawsuit urance claims, or rights	or made a demand for payment to sue	
	☐ Yes.	Describe	each claim				
34.	Other o	contingent	and unliquidate	d claims of e	very nature, including	counterclaims of the debtor and rights to s	set off claims
	☐ Yes.	Describe	each claim				
35.	Any fin	ancial ass	sets you did not	already list			
	☐ Yes.	Give spec	ific information				
36						y entries for pages you have attached for	\$300.00
Pa	art 5: Des	scribe Any	Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37.	Do you o	own or have	e any legal or equit	able interest in	n any business-related pr	operty?	
		to Part 6.			•		
	☐ Yes. G	o to line 38					

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 Serpa, Ruben Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$2,400.00 57. Part 3: Total personal and household items, line 15 \$2,500.00 58. Part 4: Total financial assets, line 36 \$300.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$5,200.00 Copy personal property total \$5,200.00

\$5,200.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

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		1300000	· · · · · · · · · · · · · · · · · · ·		
Fill in this infor	mation to identify your	case:			
Debtor 1	Ruben Serpa				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	ION	
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify the Property You Claim as Exempt
--	---------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exer		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Buick LeSabre	\$2,400.00		\$2,400.00	735 ILCS 5/12-1001(c)
2001 130000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
furniture, sofa and tv, bedroom set	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/L V.1			100% of fair market value, up to any applicable statutory limit	
1 55 in flat screen Line from Schedule A/B 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
1 shotgun and 2 pistols Line from Schedule A/B 10.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit	
wearing apparel	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
LITE TOTT SCHEUUE A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.			
Chase	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit			
Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No					
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					

3.

Yes

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Fill in this information to identify yo					
Debtor 1 Ruben Serpa					
First Name	Middle Name Last Name		·		
Debtor 2					
(Spouse if, filing) First Name	Middle Name Last Name				
United States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINOIS, EAS	TERN DIVISION	. (
Case number					
(if known)			☐ Check	if this is an	
			amend	ded filing	
Official Forms 100D					
Official Form 106D					
Schedule D: Creditor	s Who Have Claims Secure	ed by Propert	У	12/15	
	. If two married people are filing together, both are e ut, number the entries, and attach it to this form. On				
1. Do any creditors have claims secured l	by your property?				
☐ No. Check this box and submit t	his form to the court with your other schedules. Yo	u have nothing else to re	port on this form.		
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
•	more than one secured claim, list the creditor separate	Column A	Column B	Column C	
for each claim. If more than one creditor ha	is a particular claim, list the other creditors in Part 2. As tical order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.1 Inova Federal Cu	Describe the property that secures the claim:	\$3,270.00	\$0.00	\$3,270.00	
Creditor's Name	Installment account				
PO Box 1148	As of the date you file, the claim is: Check all that				
Elkhart, IN 46515-1148	apply. ☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Number, Street, Sity, State & Zip Gode	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another					
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred 08/01/2011	Last 4 digits of account number 0082	<u>!</u>			
Add the dollar value of your entries in Co	olumn A on this page. Write that number here:	\$3,270	0.00		

Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$3,270.00

Official Form 106D

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	Case 10-17795 L	Document	Page 16	of 16	of Desciviani
Fill in this in	nformation to identify your c			<i>/// 40</i>	
Debtor 1	Ruben Serpa				
Dobto: 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	_INOIS, EASTE	RN DIVISION	
Case numbe	ır				
(if known)	·				☐ Check if this is an
					amended filing
Official E	orm 106E/F				
		ha Haya Uncasurad	Claims		12/15
		ho Have Unsecured		10 (15 15 NONE)	RIORITY claims. List the other party to
Schedule G: E: D: Creditors W	xecutory Contracts and Unexpi I/ho Have Claims Secured by Pro on Page to this page. If you hav	red Leases (Official Form 106G). Deperty. If more space is needed, co	o not include any	y creditors with partially sed need, fill it out, number the	operty (Official Form 106A/B) and on cured claims that are listed in Schedule entries in the boxes on the left. Attach itional pages, write your name and
Part 1: Li	st All of Your PRIORITY Uns	secured Claims			
1. Do any cr	reditors have priority unsecured	I claims against you?			
■ No. Go	o to Part 2.				
☐ Yes.					
Part 2: Li	st All of Your NONPRIORITY	Unsecured Claims			
3. Do any cr	reditors have nonpriority unsect	ured claims against you?			
☐ No. Yo	ou have nothing to report in this pa	art. Submit this form to the court with	your other schedu	ıles.	
Yes.					
unsecured	claim, list the creditor separately	ims in the alphabetical order of the for each claim. For each claim listed, at the other creditors in Part 3.If you h	, identify what type	e of claim it is. Do not list clain	ns already included in Part 1. If more ms fill out the Continuation Page of Part
					Total claim
	lison Radiology Associa	tes SC Last 4 digits of acc	ount number _	0846	\$41.00
Nonp	oriority Creditor's Name	When was the debt	incurred?		
520	E 22nd St Apt E		-		
Lon	nbard, IL 60148-6110				
	ber Street City State Zlp Code	As of the date you	file, the claim is:	Check all that apply	
_	incurred the debt? Check one.	_			
	ebtor 1 only	Contingent			
_	ebtor 2 only	Unliquidated			
	ebtor 1 and Debtor 2 only	☐ Disputed			
	t least one of the debtors and ano	_	ITY unsecured o	:laim:	
	heck if this claim is for a comm				
debt Is the	e claim subject to offset?	☐ Obligations arisin report as priority clai		tion agreement or divorce that	i you did not
■ N	-			plans, and other similar debts	
		Other. Specify	. 51		
		Other. Specify			

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Case number (f know)

Debtor 1 Serpa, Ruben 4.2 \$10,277.00 Aes/nct Last 4 digits of account number 0001 Nonpriority Creditor's Name When was the debt incurred? 12/01/2006 PO Box 61047 Harrisburg, PA 17106-1047 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Last 4 digits of account number Amer Fst Fin 0001 \$1,485.00 Nonpriority Creditor's Name When was the debt incurred? 03/24/2016 7330 W 33rd St N Wichita, KS 67205-9369 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Capital One Bank** Last 4 digits of account number \$2,693.20 9233 Nonpriority Creditor's Name When was the debt incurred? **Capital One** PO Box 4139 Houston, TX 77210-4139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debto	r 1 Serpa, Ruben	Case number (if know)				
4.5	Citizens Bank	Last 4 digits of account number PHEA	\$85.27			
	Nonpriority Creditor's Name Citizens Bank PO Box 7092	When was the debt incurred?				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community		☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	debt Is the claim subject to offset? ■ No	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 				
	Yes	Other. Specify				
4.6	DANILO V DEL CAMPO M. D. Nonpriority Creditor's Name	Last 4 digits of account number 2001	\$422.00			
	Nonphonty Creditor's Name	When was the debt incurred? 08/01/2011				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.7	John H. Stroger, Jr. Hospital Nonpriority Creditor's Name	Last 4 digits of account number 7951	\$2,458.72			
	PO Box 70121 Chicago, IL 60673-0121	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify				

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Debio	Serpa, Ruben	Case number (it know)	
4.8	Loyola University EMPL FCU	Last 4 digits of account number 4574	\$251.00
	Nonpriority Creditor's Name Collections Dept Credit Union 2160 S 1st Ave Bldg 105 Maywood, IL 60153-3328	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.9	Loyola University Medical Center Nonpriority Creditor's Name	Last 4 digits of account number 2216	\$40.00
		When was the debt incurred?	
	PO Box 3266 Milwaukee, WI 53201-3266 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.10	MED1 02 Norwegian American Hospital	Last 4 digits of account number 4095	\$865.00
	Nonpriority Creditor's Name	When was the debt incurred? 09/01/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other Specify	

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Debio	Serpa, Ruben		Case number (if know)	
4.11	Our Lady of the Resurrection Medical Cen	Last 4 digits of account number	0027	\$75.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	1550 S Albany Ave Chicago, IL 60623-2212 Number Street City State Zlp Code	As of the date you file, the claim	is. Check all that annly	
	Who incurred the debt? Check one.	As of the date you me, the olding	S. Oncok all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
	Sonrisa Family Dental At The Hall,			
1.12	P.C.	Last 4 digits of account number	761	\$55.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	4608 W Diversey Ave	when was the debt incurred?		
	Chicago, IL 60639-1801			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify	3 Franci, and annual annual annual	
1.13	Sprint	Last 4 digits of account number	7557	\$137.00
	Nonpriority Creditor's Name	When was the debt incurred?	01/01/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify		

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Debto	r 1 Serpa, Ruben	Case number (f know)	
4.14	US Cellular	Last 4 digits of account number 1035	\$86.00
	Nonpriority Creditor's Name	When was the debt incurred? 06/01/2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts■ Other. Specify	
		— Otter. Specify	
4.15	USAA	Last 4 digits of account number LR12	\$5,832.45
	Nonpriority Creditor's Name	When was the debt incurred?	
	9800 Fredericksburg Rd		
	San Antonio, TX 78288-0001	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
			<u> </u>
4.16	Visa Nonpriority Creditor's Name	Last 4 digits of account number 2080	\$1,701.75
	Horpholity Ground o Hamo	When was the debt incurred?	
	PO Box 4521		
	Carol Stream, IL 60197-4521 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam's. Onco. an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

 Case 16-17795
 Doc 1
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Debier Serpa, Ruberr		Case Harriser (I know)	
Afni 1310 Martin Luther King Dr	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Bloomington, IL 61701-1465	Last 4 digits of account number	7557	
Name and Address Afni	On which entry in Part 1 or Part 2 d Line 4.14 of (Check one):		
1310 Martin Luther King Dr	Line 4.14 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Bloomington, IL 61701-1465		■ Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number	1035	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
AFNI Subrogation Dept	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
1310 Martin Luther King Dr Bloomington, IL 61701-1465		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Bloomington, iL 01701-1403	Last 4 digits of account number	LR12	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Afni, Inc.	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 3097 Bloomington, IL 61702-3097		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Bloomington, iL 01/02-309/	Last 4 digits of account number	7557	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Afni, Inc.	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 3097 Bloomington, IL 61702-3097		■ Part 2: Creditors with Nonpriority Unsecured Claims	
510011111gton, 12 01702-3037	Last 4 digits of account number	1035	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Blatt, Hasenmiller, Leibsker &	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Moore LLC 125 S Wacker Dr Ste 400		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60606-4440			
	Last 4 digits of account number	9233	
Name and Address	On which entry in Part 1 or Part 2 d		
I C System Inc PO Box 64378	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Saint Paul, MN 55164-0378		■ Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	2001	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Ic Systems, Inc	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
444 Highway 96 E Saint Paul, MN 55127-2557		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Came: 44., 55.27. 255.	Last 4 digits of account number	2001	
Name and Address	On which entry in Part 1 or Part 2 d	, _ ·	
Illinois Collection Service Inc.	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 1010 Tinley Park, IL 60477-9110		■ Part 2: Creditors with Nonpriority Unsecured Claims	
1111cy 1 drk, 12 00-77 3110	Last 4 digits of account number	0027	
Name and Address	On which entry in Part 1 or Part 2 d	, _ ·	
Med Busi Bur	Line 4.10 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
1460 Renaissance Dr Park Ridge, IL 60068-1331		■ Part 2: Creditors with Nonpriority Unsecured Claims	
. a.n. mage, 12 00000 1001	Last 4 digits of account number	4095	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Med Business Bureau	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1460 Renaissance Dr Ste 400 Park Ridge, IL 60068-1349		■ Part 2: Creditors with Nonpriority Unsecured Claims	
- a.r. mage, 12 00000-1049	Last 4 digits of account number	4095	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	

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Debtor 1 Serpa, Ruben		Case number (if know)		
National Collegiate Trust 7595 Montevideo Rd Ste 110	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Jessup, MD 20794-9382	Last 4 digits of account number	PHEA		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Transworld Systems Inc	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
507 Prudential Rd Horsham, PA 19044-2308		Part 2: Creditors with Nonpriority Unsecured Claims		
1101311dill, 1 A 13044-2300	Last 4 digits of account number	4574		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Wilber & Associates, PC.	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
210 Landmark Dr Normal, IL 61761-2194		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	LR12		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	C~	Obligations evicing out of a consection agreement or diverse that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 26,505.39
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,505.39

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			III FAUE / 4 UI 4U	
Fill in this infor	mation to identify your	case:		
Debtor 1	Ruben Serpa			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVI	SION
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	ent Page 25 d	of 46	
Fill in this	information to identify your	case:			
Debtor 1	Puban Sarna				
Debior 1	Ruben Serpa First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	RN DIVISION	
_					
Case numl (if known)	ber				☐ Check if this is an
()					☐ Check if this is an amended filing
					amondod ming
Officia	I Form 106H				
	lule H: Your Cod	ohtors			12/15
Scried	iule II. Toul Cou	CDIOI 3			12/15
■ No □ Yes 2. Witl Califor ■ No. □ Yes	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada, Go to line 3. s. Did your spouse, former spou	lived in a community pro New Mexico, Puerto Rico, se, or legal equivalent live w	operty state or territory Texas, Washington, ar ith you at the time?	/? (<i>Community property</i> s nd Wisconsin.)	states and territories include Arizona,
line 2	again as a codebtor only if the Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	e you have listed the cre	editor on Schedule D (Official Forn E E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
				Польто	
3.1	Name			☐ Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
				□ Schedule G, line	
	Number Street	0 1.1	710.0	_	
	City	State	ZIP Code		
2 2				Oobsalala D. P	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
				— Scriedule G, IIIIe	
	Number Street	Ctata	710.0-4-	_	
	City	State	ZIP Code		

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	in this information to identify your									
Del	btor 1 Ruben Ser	ра			_					
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for th	ne: NORTHERN DISTRIC	CT OF ILLINOIS, EAS	TERN	_					
	se number		_			Chec	k if this is	:		
(lf kr	nown)				ļ	_	n amende	J		
								ent showing of the follow	g postpetition of wing date:	chapter 13
<u>O</u>	fficial Form 106l					N	/MM / DD/ `	YYYY		
S	chedule I: Your Ind	come								12/1
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. Describe Employment	ur spouse is not filing wit On the top of any addition	h you, do not include	informa	ation	about y	our spou	ıse. If mor	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job,	Francisco est etatua	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not employed			
		Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name	COOK COUNTY	•						
	Occupation may include student homemaker, if it applies.	t or Employer's address	2121 W Harrison Chicago, IL 606		5					
		How long employed the	here? 4 month	hs			_			
Pai	rt 2: Give Details About Mo	onthly Income								
	mate monthly income as of the oss you are separated.	date you file this form. If y	ou have nothing to repo	ort for any	y line	, write \$0) in the sp	ace. Includ	le your non-filir	ng spouse
	ou or your non-filing spouse have mo ce, attach a separate sheet to this fo		bine the information for	all emplo	oyers	for that	person on	the lines b	elow. If you ne	eed more
						For Del	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$	1	,889.33	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	1 8	89 33	\$	N/A	

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Deb	otor 1	Serpa, Ruben	_	C	ase	number (if know	n)					
					For	Debtor 1			ebtor 2			
	Col	by line 4 here	4.	-	\$_	1,889.3	<u>3</u>	\$		N/A	<u> </u>	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	212.3	4	\$		N/A	\	
	5b.	Mandatory contributions for retirement plans	5b		<u>*</u> -	151.6	_	\$ <u> </u>		N/A	_	
	5c.	Voluntary contributions for retirement plans	5c		· \$	0.0	_	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	5d	١.	\$_	0.0	_	\$		N/A	_	
	5e.	Insurance	5e	٠.	\$_	0.0	0	\$		N/A	_	
	5f.	Domestic support obligations	5f.		\$	0.0	0	\$		N/A	_	
	5g.	Union dues	5g		\$	0.0	_	\$		N/A	_	
	5h.	Other deductions. Specify:	5h	.+	\$_	0.0	0	+ \$		N/A	<u>\</u>	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	364.0	1_	\$		N/A	<u>\</u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$_	1,525.3	2	\$		N/A	<u>\</u>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı	\$	0.0	0	\$		N/A		
	8b.	Interest and dividends	8b		<u>*</u> -	0.0		\$		N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c		\$	0.0		\$		N/A	_	
	8d.	Unemployment compensation	8d	l.	\$_	0.0	0	\$		N/A	<u></u>	
	8e.	Social Security	8e	٠.	\$_	0.0	0	\$		N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.0	0	\$		N/A		
	8g.	Pension or retirement income	— 8g	١.	\$-	0.0		\$		N/A	_	
	8h.	Other monthly income. Specify:	8h	.+	\$	0.0	0	+ \$		N/A	<u> </u>	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	0	\$		N/	Α	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,525.32 +	\$		N/A	= \$	1,525	32
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<u> </u>		1,323.32	Ť-		14/4		1,323	.52
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	lepende			·			le J. 11.	+\$	0	.00
12.		It the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain							12.	\$	1,525	.32
										Combi month	ined Iy incon	ne
13.	Do □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?									

Official Form 106I Schedule I: Your Income

page 2

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Fill	in this information to identify you	ur case:				
Deb	tor 1 Ruben Serpa	1		Che	eck if this is:	
Dob	tor 2				An amended filing	ing postpotition abouter 12
	ouse, if filing)				expenses as of the	ving postpetition chapter 13 following date:
Unit	ed States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINGEASTERN DIVISION	OIS,		MM / DD / YYYY	
1	e number nown)					
	Hisial Farms 400 l					
	ficial Form 106J chedule J: Your E	 Expenses				12/1:
Be info	as complete and accurate as p	possible. If two married people are ded, attach another sheet to this for				supplying correct
Par 1.	1: Describe Your Housel Is this a joint case?	nold				
••	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live ir	n a separate household?				
	□ No	t file Official Form 106J-2,Expenses	for Separate Householdof I	Debte	or 2.	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	☐ Yes. Fill out this information for each dependent	Dependent's relationship Debtor 1 or Debtor 2	to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□ No □ Yes
						□ No □ Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
3.	Do your expenses include expenses of people other th yourself and your dependent					
exp	mate your expenses as of yo	ng Monthly Expenses ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple				
val	•	on-cash government assistance if ye included it on Schedule I: Your I	•		Your exp	enses
`	•					
4.	payments and any rent for the	nip expenses for your residence. In ground or lot.	clude first mortgage	4.	\$	600.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	·	0.00
	4b. Property, homeowner's,			4b.		0.00
	· •	pair, and upkeep expenses on or condominium dues		4c. 4d.		0.00
5.		nts for your residence, such as hom		4u. 5.		0.00

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Debtor 1	Serpa, R	Ruben	Case num	ber (if known)	
6. Utili t	tion				
6a.		heat, natural gas	6a.	\$	0.00
6b.		wer, garbage collection	6b.	·	
				·	0.00
6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	: —	100.00
6d.	Other. Spe	·	6d.	·	0.00
. Foo	d and house	ekeeping supplies	7.	\$	250.00
. Chil	dcare and c	hildren's education costs	8.	\$	0.00
. Clot	hing, laund	ry, and dry cleaning	9.	\$	50.00
	•	roducts and services	10.	\$	100.00
	•	ntal expenses	11.		50.00
		Include gas, maintenance, bus or train fare.		<u> </u>	30.00
		ar payments.	12.	\$	280.00
		clubs, recreation, newspapers, magazines, and books	13.		50.00
		ributions and religious donations	14.	· -	0.00
		indutions and rengious donations	14.	Ψ	0.00
5. Insu		sources and distant from your pay or included in lines 4 or 20			
	Life insura	surance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00
				·	0.00
	Health ins		15b.	·	0.00
15c.	Vehicle ins	surance	15c.		51.00
15d.	Other insu	rance. Specify:	15d.	\$	0.00
6. Taxe	es. Do not in	clude taxes deducted from your pay or included in lines 4 or 20.			
Spec	cify:	, , ,	16.	\$	0.00
		ease payments:			
		ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	\$	0.00
	Other. Spe		17c.	·	0.00
		·		·	
	Other. Spe	·	17d.	»	0.00
		of alimony, maintenance, and support that you did not report as	18.	\$	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106l).	10.	\$	
		s you make to support others who do not live with you.		Ф	0.00
Spec			19.		
		erty expenses not included in lines 4 or 5 of this form or on Scheo			
		s on other property	20a.		0.00
20b.	Real estate	e taxes	20b.	\$	0.00
20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
	er: Specify:			+\$	0.00
	or. Opcony.			- Ψ	0.00
2. Calc	ulate your i	monthly expenses			
22a.	Add lines 4	through 21.		\$	1,531.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
					4 524 00
22C.	Auu iiile 228	a and 22b. The result is your monthly expenses.		\$	1,531.00
3. Calc	ulate your i	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	1,525.32
		monthly expenses from line 22c above.	23b.	*	1,531.00
200.	Copy your	monthly expenses from the 220 above.	200.	<u>Ψ</u>	1,331.00
222	Cuhtroot	our monthly expanded from your monthly income			
23C.		our monthly expenses from your monthly income.	23c.	\$	-5.68
	rne result	is your monthly net income.	200.	<u> </u>	0.00
24 Do v	/All expect s	an increase or decrease in your expenses within the year after yo	u file thic f	orm?	
		bu expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
		terms of your mortgage?		,	
■ N					
		Endit has			
ΠY	es.	Explain here:			

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Fill in Abia inform					I
Debtor 1	nation to identify your	case.			
Debtor	Ruben Serpa First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIV	ISION	
Case number					
(if known)	-				☐ Check if this is an amended filing
Official Forn Declarat		an Individual	Debtor's Sch	edules	12/15
If two married pe	ople are filing together,	, both are equally respons	sible for supplying correct in	nformation.	
You must file this	s form whenever you fil	e bankruptcy schedules	or amended schedules. Maki	ing a false state	ment, concealing property, or
obtaining money	or property by fraud in	connection with a bankr			0, or imprisonment for up to 20
years, or both. To	3 U.S.C. §§ 152, 1341, 15	519, and 3571.			
Sign	ı Below				
Did you no		ana who is NOT an attarn	ov to bole you fill out books	toto	
Did you pay	y or agree to pay some	one who is NOT an attorn	ey to help you fill out bankru	uptcy forms?	
■ No					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
	ity of perjury, I declare to	that I have read the sumn	nary and schedules filed with	n this declaratio	n and
	11				
X ////// Ruben	<u>Sers</u> Seyec		XSignature of Deb	tor 2	
	re of Debtor 1		Ü		
Date N	May 19, 2016		Date		

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		Docume	<u>nt Page 31 of 46</u>		
Fill in this infor	mation to identify your	case:			
Debtor 1	Ruben Serpa				
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	SION	
Case number					
if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,700.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	3,270.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	26,505.39
	Your total liabilities	\$	29,775.39
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	1,525.32
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,531.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her schedul	les.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perpurpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fan	nily, or household

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Page 32 of 46 Case number (if known) Debtor 1 Serpa, Ruben

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,308.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: 9.

From Bort 4 on Calcada la E/E againsthe fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fil	ll in th	is informa	ation to identify your	· case:			
De	ebtor 1		Ruben Serpa				
De	ebtor 2	2	First Name	Middle Name	Last Name		
(Sp	oouse if,	filing)	First Name	Middle Name	Last Name		
Ur	Jnited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION						
1	ase nu	ımber					Charle if this is an
(11)	known)		4				Check if this is an amended filing
St Be info	Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number						
•		_	every question.	wital Ctatus and Whore Var	Lived Defere		*
	art 1:			rital Status and Where You	Lived Before		
1.	Wha	at is your	current marital statu	s?			
		Married Not marri	ed				
2.	Dur	ing the las	st 3 years, have you	lived anywhere other than w	here you live now?		
		No	•				
			all of the places you liv	ved in the last 3 years. Do not in	nclude where you live now.		
	De	btor 1 Pric	or Address:	Dates Debtor 1 I there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. sta				er live with a spouse or lega ifornia, Idaho, Louisiana, Nev			
		No Yes. Mak	e sure you fill out Sch	edule H: Your Codebtors (Offic	cial Form 106H).		
Pa	art 2	Explain	the Sources of You	r Income			
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details.						
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$7,900.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	, A
		calendar y 1 to Dec	year: ember 31, 2015)	■ Wages, commissions, bonuses, tips	\$13,846.00	☐ Wages, commissions bonuses, tips	
				☐ Operating a business		☐ Operating a business	
000							

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De	btor 1 Se	erpa, Rub	en		Cas	e number(if known)	
				Debtor 1		Debtor 2	
		•		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that app	
		dar year be December		■ Wages, commissions, bonuses, tips	\$17,964.00	☐ Wages, commi bonuses, tips	ssions,
				☐ Operating a business		Operating a bu	siness
5.	Include income other publ	come regard ic benefit pa	iless of whether lyments; pension		ples of other income are alimidends; money collected from	lawsuits; royalties; ar	ocial Security, unemployment, and not gambling and lottery winnings. I
	List each	source and t	the gross incom	ne from each source separatel	y. Do not include income that	you listed in line 4.	
	■ No □ Yes.	Fill in the d	etails.				
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
		During the No.	Go to line 7. List below eacreditor. Do payments to	ach creditor to whom you paid not include payments for don an attorney for this bankruptc	you pay any creditor a total of a total of \$6,425* or more in one one of the support obligations, surple y case.	one or more payments ch as child support a	and the total amount you paid that nd alimony. Also, do not include
	■ Yes.	Debtor 1	or Debtor 2 or	on 4/01/19 and every 3 years and the sound of the sound o	mer debts.		unent.
		_					
		■ No. □ Yes		ach creditor to whom you paid r domestic support obligations			eld that creditor. Do not include aclude payments to an attorney for
	Creditor	's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for
7.	<i>Insider</i> s in which you	clude your rare an offic	elatives; any ge er, director, per	bankruptcy, did you make a eneral partners; relatives of any son in control, or owner of 20° ietor. 11 U.S.C. § 101. Include	y general partners; partnership % or more of their voting secu-	os of which you are a rities; and any managi	general partner; corporations of ing agent, including one for a
	■ No						
	☐ Yes.	List all payn	nents to an insi	der.			
	Insider's	Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Reason for this payment

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

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Deb	tor 1	Serpa, Ruben		Case	e number(if known)		
	insid Inclu	ler? de payments on debts guaranteed or cosigi	ned by an insider.				
		No					
		Yes. List all payments to an insider					
	Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor's	
Part	4:	Identify Legal Actions, Repossessions	s, and Foreclosures				<u> </u>
	List a	in 1 year before you filed for bankrupto all such matters, including personal injury ca contract disputes.	y, were you a party in any ases, small claims actions,	y lawsuit, court action divorces, collection su	on, or administrati	ive proceeding? is, support or custoo	dy modifications,
		No					
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of the cas	S 0
		in 1 year before you filed for bankruptc k all that apply and fill in the details below		rty repossessed, for	eclosed, garnishe	ed, attached, seize	ed, or levied?
		No. Go to line 11.					
		Yes. Fill in the information below.					
	Cre	ditor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened	l .			property
		in 90 days before you filed for bankrupt ounts or refuse to make a payment beca		uding a bank or fina	ncial institution, s	et off any amount	s from your
	_	No					
		Yes. Fill in the details.			•		
	Cre	ditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
		in 1 year before you filed for bankruptc t-appointed receiver, a custodian, or an		rty in the possession	n of an assignee f	or the benefit of c	reditors, a
		No					
		Yes ·					
Part	5:	List Certain Gifts and Contributions					
13.	With	in 2 years before you filed for bankrupt	cy, did you give any gifts	with a total value of	f more than \$600	per person?	
		No					
		Yes. Fill in the details for each gift.					
		is with a total value of more than \$600 p son	er Describe the gifts		Dates the gi	you gave fts	Value
		son to Whom You Gave the Gift and iress:					
14.	With	iin 2 years before you filed for bankrupt No	cy, did you give any gifts	s or contributions wi	ith a total value of	more than \$600 to	o any charity?
		Yes. Fill in the details for each gift or control	ibution.				
	moi Cha	is or contributions to charities that tota re than \$600 arity's Name dress (Number, Street, City, State and ZIP Code)	ll Describe what you	u contributed	Dates contr	you ibuted	Value
Pari	t 6:	List Certain Losses			. <u> </u>		
							

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, dld you lose anything because of theft, fire, other disaster,

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Del	otor 1	Serpa, Ruben	Ca	se number(if known)		
	or ga	ambling?				
	_	No Yes. Fill in the details.				
		cribe the property you lost and the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List insurance claims on line 33 ofSchedule A/B: Pro	t pending loss	your \	/alue of property lost
Par	t 7:	List Certain Payments or Transfe	rs			
16.	cons	sulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your be preparing a bankruptcy petition? reparers, or credit counseling agencies for services	• •	• • • •	anyone you
		No .				
		Yes. Fill in the details.				
	Add Ema	son Who Was Paid Iress all or website address son Who Made the Payment, if Not	Description and value of any propert transferred	ty Date pa transfe made	ayment or er was	Amount of payment
	Hei 33 I	ler & Richmond, Ltd. N Dearborn St Ste 1907 cago, IL 60602-3828	0.00	05/06/	2016	\$650.00
17.	pron Do n		uptcy, did you or anyone else acting on your be ditors or to make payments to your creditors? you listed on line 16.	chalf pay or transfer	any property to	anyone who
		Yes. Fill in the details.				
		son Who Was Paid Iress	Description and value of any propert transferred	ty Date pa transfe made	ayment or er was	Amount of payment
18.	trans Inclu- gifts	ferred in the ordinary course of yo	s made as security (such as the granting of a securi			
		Yes. Fill in the details.				
		son Who Received Transfer Iress	Description and value of property transferred	Describe any prope payments received paid in exchange		ate transfer was ade
	Per	son's relationship to you		para in oxonango		
19.	bene	oficiary? (These are often called asse	kruptcy, did you transfer any property to a self- t-protection devices.)	-settled trust or simil	lar device of whi	ich you are a
		Yes. Fill in the details.				
	Nan	ne of trust	Description and value of the propert	y transferred		ate Transfer was ade

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De	otor 1	Serpa, Ruben			Case number (if known)	
Pai	t 8:	List of Certain Financial Accounts, In	nstruments, Safe Depo	osit Boxes, and Stor	rage Units	
20.	sold, include house	in 1 year before you filed for bankrupt moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso	or other financial acc	ounts; certificates o	of deposit; shares in banks, o	
•		No Yes. Fill in the details.				
		ne of Financial Institution and ress (Number, Street, City, State and ZIP)	Last 4 digits of account number	Type of account instrument	unt or Date account wa closed, sold, moved, or transferred	s Last balance before closing or transfer
21.		ou now have, or did you have within 1 , or other valuables?	year before you filed	for bankruptcy, any	y safe deposit box or other d	epository for securities,
	_	No Yes. Fill in the details.				
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had Address (Numl and ZIP Code)	access to it? per, Street, City, State	Describe the contents	Do you still have it?
22.	Have	you stored property in a storage unit	or place other than y	our home within 1 y	rear before you filed for bank	ruptcy?
	_ `	No Yes. Fill in the details.				
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	to it?	or had access per, Street, City, State	Describe the contents	Do you stiil have it?
Pai	t 9:	Identify Property You Hold or Control	ol for Someone Else			
23.	Do yo	ou hold or control any property that s sone.	omeone else owns? li	nclude any property	you borrowed from, are sto	ring for, or hold in trust for
	`	No Yes. Fill in the details.				
	Own	res. Fill in the details. ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the (Number, Street, Code)	property? City, State and ZIP	Describe the property	Value
Pai	t 10:	Give Details About Environmental In	formation			
For	the pu	rpose of Part 10, the following definit	ions apply:			
	toxic	conmental law means any federal, stat substances, wastes, or material into colling the cleanup of these substance	the air, land, soil, surf	ace water, groundw	• • • • • • • • • • • • • • • • • • • •	
	Site n	neans any location, facility, or proper operate, or utilize it, including dispos	ty as defined under a		w, whether you now own, op	erate, or utilize it or used to
	Haza	rdous material means anything an en- rial, pollutant, contaminant, or similar	vironmental law defin	es as a hazardous v	vaste, hazardous substance,	toxic substance, hazardous
Rep	ort all	notices, releases, and proceedings th	nat you know about, re	egardless of when t	hey occurred.	••
24.	Has a	any governmental unit notified you the	at you may be liable o	r potentially liable ι	under or in violation of an en	vironmental law?
	_	No Yes. Fill in the details.				
	Nam	te of site ross (Number, Street, City, State and ZIP Code)	Governmenta Address (Numi ZIP Code)	l unit per, Street, City, State and	Environmental law, if you know it	ou Date of notice
			oous			

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Del	btor 1	Serpa, Ruben		Case number(if known)					
25.	Have	e you notified any governmental unit of a	any release of hazardous material?						
		No			•				
		Yes. Fill in the details.		•					
		ne of site iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have	e you been a party in any judicial or adm	inistrative proceeding under any enviro	onmental law? Include settlements ar	nd orders.				
		No							
		Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11:	Give Details About Your Business or C	Connections to Any Business						
27.	With	in 4 years before you filed for bankrupto	y, did you own a business or have any	of the following connections to any	business?				
		\square A sole proprietor or self-employed in	a trade, profession, or other activity, e	Ither full-time or part-time					
		☐ A member of a limited liability compa	any (LLC) or limited liability partnership	(LLP)					
		☐ A partner in a partnership							
		☐ An officer, director, or managing exe	cutive of a corporation						
		\square An owner of at least 5% of the voting	or equity securities of a corporation						
		No. None of the above applies. Go to Pa	art 12.						
	Business Name		in the details below for each business. Describe the nature of the business	Employer Identification number					
		Iress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.				
28.		fithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial stitutions, creditors, or other parties.							
		No							
		Yes. Fill in the details below.							
	Nan	ne Iress	Date Issued						
		nber, Street, City, State and ZIP Code)							
Pai	t 12:	Sign Below							
true ban 18 L	and c krupt J.S.C.	ad the answers on this <i>Statement of Fina</i> correct. I understand that making a false cy case can result in fines up to \$250,000 §§ 152, 1341, 1519, and 3571.	statement, concealing property, or obta 0, or imprisonment for up to 20 years, o	aining money or property by fraud ir					
		Serpa re of Debtor 1	Signature of Debtor 2						
Dat	e N	May 19, 2016		 					
Did N	10	ntach additional pages to Your Statemen	nt of Financial Affairs for Individuals Fill	ng for Bankruptcy (Official Form 107)?				
= N	lo	pay or agree to pay someone who is not a		•					
□ Y	es. N	lame of Person Attach the Bankrup	tcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).					
Offic	ial Fon	m 107 Statem	ent of Financial Affairs for Individuals Filing	for Bankruptcy	page (

Addison Radiology Associates SC 520 E 22nd St Apt E Lombard, IL 60148-6110

Aes/nct PO Box 61047 Harrisburg, PA 17106-1047

Afni 1310 Martin Luther King Dr Bloomington, IL 61701-1465

AFNI Subrogation Dept 1310 Martin Luther King Dr Bloomington, IL 61701-1465

Afni, Inc. PO Box 3097 Bloomington, IL 61702-3097

Amer Fst Fin 7330 W 33rd St N Wichita, KS 67205-9369

Blatt, Hasenmiller, Leibsker & Moore LLC 125 S Wacker Dr Ste 400 Chicago, IL 60606-4440

Capital One Bank Capital One PO Box 4139 Houston, TX 77210-4139

Citizens Bank Citizens Bank PO Box 7092 Bridgeport, CT 06601-7092

I C System Inc PO Box 64378 Saint Paul, MN 55164-0378

Ic Systems, Inc 444 Highway 96 E Saint Paul, MN 55127-2557

Illinois Collection Service Inc. PO Box 1010 Tinley Park, IL 60477-9110

Inova Federal Cu PO Box 1148 Elkhart, IN 46515-1148

John H. Stroger, Jr. Hospital PO Box 70121 Chicago, IL 60673-0121 Loyola University EMPL FCU Collections Dept Credit Union 2160 S 1st Ave Bldg 105 Maywood, IL 60153-3328

Loyola University Medical Center PO Box 3266 Milwaukee, WI 53201-3266

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068-1331

Med Business Bureau 1460 Renaissance Dr Ste 400 Park Ridge, IL 60068-1349

National Collegiate Trust 7595 Montevideo Rd Ste 110 Jessup, MD 20794-9382

Our Lady of the Resurrection Medical Cen 1550 S Albany Ave Chicago, IL 60623-2212

Sonrisa Family Dental At The Hall, P.C. 4608 W Diversey Ave Chicago, IL 60639-1801

Transworld Systems Inc 507 Prudential Rd Horsham, PA 19044-2308

USAA 9800 Fredericksburg Rd San Antonio, TX 78288-0001

Visa PO Box 4521 Carol Stream, IL 60197-4521

Wilber & Associates, PC. 210 Landmark Dr Normal, IL 61761-2194 Case 16-17795 Doc 1 Filed 05/27/16 Entered 05/27/16 09:19:01 Desc Main Document Page 43 of 46

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No.
Serpa, Ruben		Chapter 7
	Debtor(s)	
	VERIFICATION OF CF	REDITOR MATRIX
		Number of Creditors
The above-named Debtor(s)	hereby verifies that the list of credit	ors is true and correct to the best of my (our) knowledge.
Date: May 19, 2016	Ruben S	Jeroa
	Debtor	
	Joint Debtor	

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(A)			· ·				
Fill in this informa	Fill in this information to identify your case:						
Debtor 1	Ruben Serpa						
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
		NODTHERNIBLE	EDIOT OF ILLINOIS FACTERN DIVISION				
United States Bank	kruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS, EASTERN DIVISION				
Case number			351				
(if known)	7			☐ Check if this is an			
				amended filing			
Official For	m 108						
		n for Indi	viduals Filing Under Chapt	or 7			
Statemen	t of intentic	n for mar	viduals Filing Under Chapt	er / 12/15			
16			and this farms if				
	idual filing under cha		out this form it:				
	claims secured by yo	Cest 20 80 151					
	d personal property a		ot expired. You file your bankruptcy petition or by the date set	for the meeting of creditors			
			time for cause. You must also send copies to the				
the form							
If two married peo	ple are filing together	in a joint case, bot	h are equally responsible for supplying correct info	ormation. Both debtors must sign			
	the form.		. , , ,	•			
Be as complete an	d accurate as possible	e. If more space is	needed, attach a separate sheet to this form. On the	e top of any additional pages.			
	ur name and case nur		,	, , , , , , , , , , , , , , , , , , , ,			
Dodd Liet Von	O dit \A/b - 11	- Carrend Claims					
Part 1: List You	ur Creditors Who Hav	e Secured Claims	`				
		art 1 of Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the			
information belo	ow. ditor and the property t	hat is collateral	What do you intend to do with the property that	Did you claim the property			
			secures a debt?	as exempt on Schedule C?			
0 - 17 - 1-				П.,			
Creditor's			☐ Surrender the property.	□ No			
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes			
Description of			Agreement.				
property			☐ Retain the property and [explain]:				
securing debt:				_			
Creditor's			☐ Surrender the property.	□ No			
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	Yes			
Description of			Agreement.	_ 165			
property			Retain the property and [explain]:				
securing debt:			Service (1997) 1997	_			
			G.				
Creditor's			☐ Surrender the property.	□ No			
name:			Retain the property and redeem it.	Yes			
Description of			Retain the property and enter into a Reaffirmation	☐ res			
property			Agreement. Retain the property and [explain]:				
securing debt:			- Netain the property and [explain].				
, , , , , , , , , , , , , , , , , , ,			ASSESSED CO. C.	_			
Creditor's			☐ Surrender the property	П №			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor 1 Serpa, Ruben	Case number (if known)		
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes	
	ed in Schedule G: Executory Contracts and Unexpired Lexpired leases are leases that are still in effect; the lease		
Describe your unexpired personal property leases		Will the lease be assumed?	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased Property:	-	□ No	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased Property:		□ No	
		☐ Yes	
x Kuben Serpa	my intention about any property of my estate that secu	res a debt and any personal	
Signature of Debtor 1 Date May 19, 2016	Date		

 $_{B201B\;(Form\;2}\text{Case}_{18}\text{-}6-17795}$

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Desc Main

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Northern District of Illinois, Eastern Division

IN RE:		Case No
Serpa, Ruben		Chapter 7
	Debtor(s)	

CERTIFICATION OF NOTI UNDER § 342(b) OF T		· ,
Certificate of [Non-Attorne	ey] Bankruptcy Petiti	on Preparer
I, the [non-attorney] bankruptcy petition preparer signing the del notice, as required by § 342(b) of the Bankruptcy Code.	btor's petition, hereby ce	rtify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X		(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, r partner whose Social Security number is provided above.	responsible person, or	
Certificat	te of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read t	he attached notice, as rec	quired by § 342(b) of the Bankruptcy Code.
Serpa, Ruben	_ X	5/27/2016
Printed Name(s) of Debtor(s)	Signature of Deb	
Case No. (if known)	X Signature of Join	
	Signature of Join	t Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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